

**ANHP**

ADVOCATES FOR NEW HAMPSHIRE PATIENTS

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FEC MAIL CENTER

2018 JAN 29 PM 2:24

76 SARAH CIRCLE  
LACONIA NH 03246

T: 603.455.1145

(1) Year-End Report 2017

January 27, 2018

(2) Termination Report

RE: ID# C0515973 Advocate for NH Patients

To Whom It May Concern:

Please find the Year-End Report for 2017 and a Termination Report.

We request an Administrative Termination. We have not received any contributions nor made any donations in the last six month period. We have less than a \$1000 on-hand. The only balance remaining is to cover closing accounting and reporting costs. Any remaining balance will be donated to a qualifying healthcare charity qualifying under FEC rules. Thank you.

Sincerely,

Henry D. Lynch  
Treasurer

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

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2018 JAN 29 PM 2:24

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1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

**ADVOCATES FOR NEW HAMPSHIRE PATIENTS**

ADDRESS (number and street) **176 SARAH CIRCLE**

Check if different than previously reported. (ACC) **LACONIA** **NH** **03249**

2. **FEC IDENTIFICATION NUMBER ▼** **C00515973** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT  **NEW (N)** OR  **AMENDED (A)**

**4. TYPE OF REPORT**  
(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on 12 / 01 / 2017 in the State of NH

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on 12 / 01 / 2017 in the State of NH

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Henry D. Lipman

Signature of Treasurer  Date 07 / 27 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name:

ADVOCATES FOR NEW HAMPSHIRE PATIENTS

Report Covering the Period:

From:

07' 01' 2017

To:

12' 31' 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2017		213061
(b) Cash on Hand at Beginning of Reporting Period.....	101561	
(c) Total Receipts (from Line 19).....	000	000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....		
7. Total Disbursements (from Line 31).....	21250	132750
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	80311	80311
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

2018-01-20 10:00:00



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	000	1,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements (Including Non-Federal Donations) <i>990 PROP</i> .....	2,125.00	3,275.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2,125.00	1,327.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	2,125.00	1,327.50

NON-FEDERAL DONATIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

2018-01-20 10:00:00 AM



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FEC MAIL Q1111  
2018 JAN 29 PM 2:24

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U.S. POSTAGE  
PAID  
LACONIA, NH  
03245  
JAN 27, 18  
AMOUNT  
**\$24.70**  
R2304N117535-20

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- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery Required (additional fee, where available)
- 10:30 AM Delivery Required (additional fee, where available)
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Federal Election Commission  
999 E Street NW

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20463

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- \$100.00 Insurance Included.

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1-Day  2-Day  Military  DPO

PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage Insurance Fee COD Fee

03246 1/29/18 \$24.70

Date Accepted (MM/DD/YY) Scheduled Delivery Time Return Receipt Fee Live Animal Transportation Fee

1/27/18 10:30 AM \$

Time Accepted 10:48 AM 10:30 AM Delivery Fee

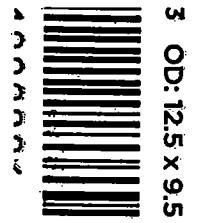
Special Handling/Fragile Sunday/Holiday Premium Fee Total Postage & Fees

Weight lbs. ozs. Rate Acceptance Employee Initials \$24.70

DELIVERY (POSTAL SERVICE USE ONLY) Delivery Attempt (MM/DD/YY) Time Employee Signature

Delivery Attempt (MM/DD/YY) Time Employee Signature

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Federal Election Commission  
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 1/27/2018
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *MP*  
 (3/2015)

1/29/2018  
 DATE PREPARED

20180129 10:00:00 AM